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(Depositor's name)	
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/769,752	02/03/2004	Naoki Oguchi	1341.1182	9761
TITLE OF INVENTION: PA	ACKET PROCESSING SYS	STEM		

APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	ИО	\$1510	\$300	<del>8</del> 9/31/2669	LNGUYENE 80000062	10769- <mark>07/30/2009</mark>	
EXAM	INER	ART UNIT	CLASS-SUBCLASS	01 FC:1501 151		1510.00 OP	
SAMUEL, D	EWANDA A	2416	370-235000	02 FC:1504		300.00 OP	
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		<ol> <li>For printing on the patent front page, list</li> <li>the names of up to 3 registered patent attorneys or agents OR, alternatively,</li> <li>the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</li> </ol>		per a 2	HALSEY LLP		
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED (	ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assig recordation as set forth in 37 CFR 3.11. Completion of this form is	nee data will appear on the patent. If an assignee is identified below, the document has been filed for NOT a substitute for filing an assignment.
(A) NAME OF ASSIGNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)
FUJITSU LIMITED	KAWASAKI, JAPAN
Please check the appropriate assignee category or categories (will not be	pe printed on the patent): 🔲 Individual 🛣 Corporation or other private group entity 🚨 Government
4a. The following fee(s) are submitted:	4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)
Issue Fee	X A check is enclosed.
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Advance Order - # of Copies	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-3935 (enclose an extra copy of this form).
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).
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Authorized Signature	Date July 30 2009
Typed or printed name MARK J. HENRY	Registration No. 36,162

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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